

PART B - FEE(S) TRANSMITTAL



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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 04/08/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
Richard C. Irving Banner & Witcoff, LTD 11th Floor 1001 G. Street, N.W.			O 8 2005	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the States Postal Service with sufficient postage for first class mail in an en addressed to the Mail Stop ISSUE FEE address above, or being fatransmitted to the USPTO (703) 746-4000, on the date indicated below.				deposited with the Unit class mail in an envelo- above, or being facsim- te indicated below.	
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APPLICATION NO.	FILING DATE	F	FIRST NAMED	T NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
09/850,197	05/08/2001		Shu-shaw	v Wang	ong 05245.00005 9736			9736	
TITLE OF INVENTION: M	IETHOD AND APPARATU	S FOR FILTERIN	G INCOMIN	G CALLS IN A	MOBILE CO	MMUNICATION S	YSTEM		_
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICA	TION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400		\$3	00	\$1700		07/08/2005	
EXAM	IINER	ART UNI	T	CLASS-SU	JBCLASS]			
BEAMER, TEMICA M 2681				455-43	33000	_			
CFR 1.363).	e address or indication of "Fo	`	(1) the nan	ting on the pate	registered nate	•	Banne	er & Witcoff	_ <u>,</u> Ltd
Address form PTO/SB/1: "Fee Address" indicated PTO/SB/47; Rev 03-02 Number is required.	or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)					_
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	low, no assignee of this form is NOT	lata will appe `a substitute f	ear on the pate for filing an ass	nt. If an assig ignment.	nee is identified bel 07/12/2005 SZE			for 9850197
(A) NAME OF ASSIGN	EE	(B)	RESIDENC	E: (CITY and S	STATE OR CC	UNTRY)			1020111
Nokia,	Inc.		Irvi	ing, TX	USA	01 FC:1501 02 FC:1504	1400. 300.	00 DA 00 DA	
Please check the appropriate	e assignee category or catego	ries (will not be pri	nted on the pa	atent): 🖵 In	dividual 🗓 🛣	Corporation or other p	private grou	pentity Governme	nt
4a. The following fee(s) are	enclosed:		Payment of I						_
XX Issue Fee			A check in the amount of the fee(s) is enclosed.						
Publication Fee (No s	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0/33 (enclose an extra copy of this form).								
Advance Order - # of	Copies	<u> </u>	Deposit Acco	ount Number	19-17733	charge the required (enclose	an extra cop	py of this form).	το
_ ` .	(from status indicated above MALL ENTITY status. See	,	b. Applica	ant is no longer	claiming SMA	ALL ENTITY status.	See 37 CFI	R 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu tublication Fee (if required) vords of the United States Pate	te Fee and Publicat will not be accepted ent and Trademark	ion Fee (if any from anyone Office.	y) or to re-appl other than the	y any previous applicant; a reg	sly paid issue fee to t gistered attorney or a	he applicati gent; or the	ion identified above. e assignee or other party	in
Authorized Signature	J. m. 1	1			Date	7/8(0	5		_
Typed or printed name _	John M. Flemin	ng			Registration	n No. 56,5	36		_
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/21 (02-04)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995

	B	Application Number	09/850,197				
TRANSMATAL	7	Filing Date	05/08/2001				
FORM		First Named Inventor	Shu-Shaw Wang et al.				
(to be used for all correspondence after initial	al filing)	Art Unit	2681				
		Examiner Name	Beamer, Temica M.				
Total Number of Pages in This Submission	5	Attorney Docket Number	005245.00005				
ENCLOSURES (check all that apply)							
Fee Transmittal Form	☐ Drawi	ng(s)	After Allowance Communication to Group				
Fee Attached	Licens	sing-related Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply	Petitio	on	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final	Petition Applie	on to Convert to a Provisional cation	Proprietary Information				
		r of Attorney, Revocation ge of Correspondence Address	Status Letter				
Extension of Time Request		nal Disclaimer	Other Enclosure(s) (please identify below):				
Express Abandonment Request	Reque	est for Refund	PTOL-85, issue fee and publication fee				
☐ Information Disclosure Statement	☐ Information Disclosure Statement ☐ CD, N		, , , , , , , , , , , , , , , , , , , ,				
Certified Copy of Priority Document(s)	Rema	rks					
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm							

4.

Individual name

Signature

Date

July 8, 2005 CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name Signature Date

John M. Fleming, Reg. No. 56,536

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Applicant claims small entity status we 37 CFR 1.27 Fing Date O5/08/2001 First Named Inventor Shu-Shaw Wang et al.	5 Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005;11.8: 48481.			Complete if Known						
Applicant claims small entity status See 37 CFR 1.27 Examiner Name Beamer, Temica M. Applicant claims small entity status See 37 CFR 1.27 Examiner Name Beamer, Temica M. TOTAL AMOUNT OF PAYMENT (check all that apply) At Unit 2681 Atomey Ocoset No. 005245.00005 METHOD OF PAYMENT (check all that apply) At Unit 2681 Atomey Ocoset No. 005245.00005 Deposit Account Deposit Account Number, 19-0733 Deposit Account Name Banner & Witcoff, LTD. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge are yet additional fee(s) or underpayments of fee(s) Credit ary overpayments	FÉE TRANSMÍPTAL 🗞			Application Number	09/850,19					
Application trains small entity status September Shu-Shaw Wang et al.				Filing Date	05/08/2001					
Art Limit 2681 Attempt Docket No. O05245.00005 Art Limit 2681 Attempt Docket No. O05245.00005 Attempt Docket No. O05245.00005 Attempt Docket No. O05245.00005 O05245.0005 O0524					First Named Inventor	Shu-Shaw	l.			
METHOD OF PAYMENT (check all that apply)	Applicant claims sr	mall entity sta		27, 9	Examiner Name	Beamer, T	emica M.			
METHOD OF PAYMENT (check all that apply)	TOTAL AMOUNT OF	PAYMENT		~	Art Unit	2681				
Check	, STAL AMOUNT OF	, , , , , , et lant 4	(Ψ) 1,700.00		Attorney Docket No.	005245.00	0005			
Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, LTD. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1,16 and 1,17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee(s) Fee (s) Fee(s) Fe	METHOD OF PAYMENT (check all that apply)									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee	☐ Check ☐ Credit	Card Mo	oney Order 🔲 Nor	ie 🗌 Otl	her (please identify) :			· · · · · ·		
Charge fee(s) indicated below	Deposit Account	Deposit Accou	nt Number: 19-073	33	Deposit Account	Name: Ban	ner & Witc	off, LTD.		
Charge any additional fee(s) or underpayments of fee(s)	For the above	-identified dep	osit account, the Dire	ector is her	reby authorized to: (che	eck all that app	ply)			
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Utility	Application Type	<u>Fee</u> (\$)		<u>Fee(</u> \$						
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Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant	200	100	300	150	160	80			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims over 3 (including Reissues) Each independent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof sheets Fee Paid (\$) — -100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filling surcharge): 1501, issue fee, and 1504, publication fee Registration No. (Attorney/Agent) 56,536 Telephone (202) 824-3000	Reissue	300	150	500	250	600	300			
Fee Description Each claim over 20 (including Reissues) 50 25 25 200 100 100 180	Provisional	200	100	0	0	0	0			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Fee Paid (\$)	2. EXCESS CLAIM	FEES			÷			Small Entity		
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Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501, issue fee, and 1504, publication fee SUBMITTED BY Registration No. (Attorney/Agent) 56,536 Telephone (202) 824-3000										
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(Automot/Agent)		<u> </u>	.1			56.536	Talanhan	e (202) 824-3000		
NAME OF TAXABLE PARTIES OF TAXAB	Signature Name (Print/Type)	John M. El	emina		(Attorney/Agent)		Date	July 8, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.